

## APPLICATION FOR RECORDS RETENTION SCHEDULE

GEORGIA DEPARTMENT OF HUMAN RESOURCES  
OFFICE OF ADMINISTRATIVE SERVICES  
RECORDS MANAGEMENT UNIT

For instructions on completing this form contact DHR Records Management Unit, 47 Trinity Avenue, Atlanta, Georgia 30334. Phone - (404) 656-4976 GIST: 221-4983

<b>DHR</b>		<b>1. GEORGIA DEPARTMENT OF HUMAN RESOURCES</b>		<b>ARCHIVES AND HISTORY</b>	
Application Date <b>1/6/83</b>		Division of Rehabilitation Services Field Services Section 47 Trinity Ave. S.W. Atlanta, Ga. 30334		Application Number <b>83-32</b>	
Application Number <b>82-67</b>				Date Received <b>JAN 11 1983</b>	
				Date Completed <b>MAR 17 1983</b>	
2. Person to Contact <b>Mary Balmes</b> <b>Darlene Taylor</b>		Working Title <b>Secretary</b> <b>Section Chief</b>		Telephone Number <b>656-2639</b>	
3. Action Requested a. <input checked="" type="checkbox"/> Establish Retention Schedule; record will continue to accumulate. b. <input type="checkbox"/> Dispose of present accumulation; no further accumulation anticipated. c. <input type="checkbox"/> Amend Application No. _____ Check One: <input type="checkbox"/> Change; <input type="checkbox"/> Supersede; <input type="checkbox"/> Void					
4. Dates of Series Earliest <b>1980</b>		5. Records Series Title (followed by title used in office, if different) <b>continuing Field Services Section Director's Subject File</b>			
Latest					
6. Division and Office Function What is the function of the Division and the Office in which this record series is created? <b>The Division of Rehabilitation Services is responsible for providing those services necessary to increase the physical, mental, social and vocational capacities of handicapped individuals so their roles as contributing members of our society will be enhanced. The Field Services Section is responsible for direction and technical assistance to the rehabilitation services program district and local offices, except the Disability Adjudication Section, Georgia Industries for the Blind, and the Roosevelt Warm Springs Institute.</b>					
7. Records Series Description This file contains the following documents (include form numbers and titles, if any): Attach samples of the file.  Documents relating to: <b>providing direction and technical assistance to (8) district and (60) local offices of the rehabilitation services program</b>  Included are: <b>Technical Assistance Unit-Annual Work Plan; Field Services Quarterly Progress Report; Annual District Work Plans; Quarterly District Progress Reports; Program Specialists' recommendations concerning District Work Plans and District Progress Reports; and related correspondence.</b>  File is arranged: <b>Alphabetically by subject</b>					
8. Monthly Reference Rate One to six months old <b>6</b> ; twenty-five months and older <b>1</b> ?		How often are records referred to which are: Seven to twelve months old <b>4</b> ; Thirteen to twenty-four months old <b>4</b> ;			
9. Annual Rate of Accumulation or Records Letter-size drawers <b>2</b> ; Legal-size drawers _____ ; Shelves _____ ; Other (Specify) _____					

YES	NO	10. Questionnaire (Place an "X" in the proper column)
X		a. Is this the official copy of the series? If not, where is it?
	X	b. Does the series contain confidential information requiring security handling? If yes, cite law or regulation.
	X	c. Is this a vital record?
	X	d. Does this series have historical or long term research value?
	X	e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be scheduled separately?
	X	f. Is the information contained in this series ever published? If yes, attach copy.
	X	g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy.
	X	h. Is there a duplication of this series in your office, or in another office or agency? If yes, where?
	X	i. Is this series (or a major portion of it) regularly microfilmed?
	X	j. Does the record series result in a computer printout?

#### 11. Retention Requirements

The following requires the series to be kept:

- |                          |              |                                   |                 |
|--------------------------|--------------|-----------------------------------|-----------------|
| a. State Law             | _____ years. | d. Audit period                   | _____ years.    |
| b. Statute of limitation | _____ years. | e. Administrative need            | <u>4</u> years. |
| c. Federal law           | _____ years. | f. Federal retention instructions | _____ years.    |

Attach copy or excerpt of laws or regulations. Explain administrative need.

**Administratively, these files are needed to document the performance of the Field Services section.**

12. Approved Disposition Instructions: This agency recommends that the file series be cut off at the end of each: ☐ Calendar Year; ☒ Fiscal Year; ☐ Other \_\_\_\_\_ then,

- ☒ Hold in the current files area \_\_\_\_\_ month(s) 2 year(s); then
- ☐ Transfer to local holding area; hold \_\_\_\_\_ year(s); then
- ☒ Transfer to State Records Center; hold 2 year(s); then
- ☒ Destroy
- ☐ Transfer to State Archives for permanent retention.
- ☐ Other (Specify) \_\_\_\_\_

These instructions apply to all prior and future accumulations of the series.

Agency Head/Designee (Signature)	Date	Records Management Officer (Signature)	Date
<i>Darlene Taylor</i>	12/21/82	<i>Paul T. Murphy</i>	12/17/82
<p>State Records Committee (Signature) _____ Date _____</p>			
<p>Recommendations in paragraph 12 are approved. (If disapproved, attach letter of explanation.)</p>		<p>State Auditor/Designee _____ 7/1-83</p> <p>Secretary of State/Designee <i>Edward Weldon</i> 1/28/83</p> <p>Attorney General/Designee _____ 3-5-83</p>	